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Date: June 15, 2005
Fax No.: 703-672-9306
To: USPTO
Art Unit: Unknown
Appln. No.: 10/628,309
Filing Date: July 29, 2003
Docket No.: A1571-4P US
Title: Compounds with Analgesic Effect
From: Jianzhong Shen
Customer No.: 22466

No. of Pages: 13
(including this one)

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Liz Ashton
Typed or Printed Name

A handwritten signature of "Liz Ashton" in black ink.

Signature

Attachments

- 1) Revocation of POA with New POA and Change of Correspondence Address
- 2) Statement under 37 CFR 3.73(b)
- 3) Copy of Recorded Assignments

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AstraZeneca
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Fax: +1 302 886 8221
www.astrazeneca-us.com

AstraZeneca Pharmaceuticals LP
1800 Concord Pike
Wilmington, Delaware 19850-5438
USA

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JUN 15 2005

PTO/SB/82 (04-05)

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REVOCATION OF POWER OF
ATTORNEY WITH
NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS

Application Number	10/628,309
Filing Date	July 29, 2003
First Named Inventor	Pelzman
Art Unit	Unknown
Examiner Name	Unknown
Attorney Docket Number	A1571-4P US

I hereby revoke all previous powers of attorney given in the above-identified application.

 A Power of Attorney is submitted herewith.

OR

 I hereby appoint the practitioners associated with the Customer Number: 22466 Please change the correspondence address for the above-identified application to: The address associated with
Customer Number:22466

OR

 Firm or
Individual Name

Address

City

State

Zip

Country

Telephone

Email

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

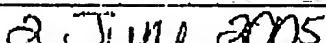
Signature



Name

Paul Denclay

Date



Telephone

44 20 73045324

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

 *Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.30. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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STATEMENT UNDER 37 CFR 3.73(b)**RECEIVED
CENTRAL FAX CENTER**Applicant/Patent Owner: Pulman et al.Application No./Patent No.: 10/628,309 Filed/Issue Date: July 29, 2003JUN 15 2005Entitled: Compounds with Analgesic EffectAstraZeneca Canada Inc., a corporation
(Name of Assignee)
(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. the assignee of the entire right, title, and interest; or
2. an assignee of less than the entire right, title and interest.
The extent (by percentage) of its ownership interest is _____ %

in the patent application/patent identified above by virtue of either:

A An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

OR

B A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: Pulman et al. To: Astra Pharma Inc.
The document was recorded in the United States Patent and Trademark Office at Reel 012299, Frame 0020, or for which a copy thereof is attached.
2. From: Astra Pharma Inc. To: AstraZeneca Canada Inc.
The document was recorded in the United States Patent and Trademark Office at Reel 013873, Frame 0318, or for which a copy thereof is attached.
3. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

 Additional documents in the chain of title are listed on a supplemental sheet. Copies of assignments or other documents in the chain of title are attached.

(NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.06)

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

Paul Dennerley

Signature

2 June 2005

Date

Paul Dennerley

Printed or Typed Name

44 20 73045324

Telephone Number

Director, IP Strategy

Title

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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JUNE 13, 2002

PTAS

Chief Information Officer
Washington, DC 20231
www.uspto.govPILLSBURY WINTHROP LLP
MICHAEL A. SANZO
1600 TYSONS BOULEVARD
MCLEAN, VA 22102

102060897A

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RECORDATION DATE: 04/15/2002

REEL/FRAME: 012796/0020
NUMBER OF PAGES: 3

BRIEF: ASSIGNMENT OF ASSIGNEE'S INTEREST (SEE DOCUMENT FOR DETAILS).

ASSIGNEE:
PELMAN, BENJAMIN

DOC DATE: 12/17/1997

ASSIGNEE:
ROBERTS, EDWARD

DOC DATE: 01/23/1998

ASSIGNEE:
ASTRA PHARMA INC.
1004 MIDDLEGATE ROAD
MISSISSAUGA, ONTARIO L4Y 1M4,
CANADASERIAL NUMBER: 10121683
PATENT NUMBER:FILING DATE: 04/15/2002
ISSUE DATE:SHARON BROOKS, EXAMINER
ASSIGNMENT DIVISION
OFFICE OF PUBLIC RECORDS

04-19-2002

FORM PTO-174 (Rev. 6-20)		102060897	U.S. DEPARTMENT OF COMMERCE Patent and Trademark Office
08/17/00 650-101115P 430		DET	
To the Honorable Commissioner of Patents and Trademarks:			
Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
3. Nature of conveyance: <input checked="" type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input type="checkbox"/> Change of Name <input type="checkbox"/> Other _____			
Execution Date: December 17, 1997 and January 23, 1998			
Additional name(s) & address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
4. Application number(s) or patent number(s): If this document is being filed together with a new application, the execution date of the application is: _____			
A. Patent Application No(s) Divisional of 09/645,565 filed herewith		B. Patent No(s)	
Additional numbers attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
5. Name and address of party to whom correspondence concerning document should be mailed:		6. Total number of applications and patents involved: <input type="checkbox"/> 1	
Name: Michael A. Sanzo Internal Address: _____		7. Total Fee (37 C.P.R. § 3.41) \$ <input type="checkbox"/> 40.00	
Street Address: Pillsbury Winthrop LLP 1600 Tysons Boulevard		<input checked="" type="checkbox"/> Enclosed <input checked="" type="checkbox"/> Authorized to be charged to deposit account	
City/State/ZIP: McLean, VA 22102		8. Deposit account number: <u>03-3975 - to be used only if fee is not enclosed</u> (Use deposit account if fee is being paid by deposit account)	
DO NOT USE THIS SPACE			
9. Statement and signature. <i>To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.</i>			
Michael A. Sanzo Name of Person Signing		Signature <u>Michael A. Sanzo 04-19-2002</u>	
Total number of pages including cover sheet, attachments, and document: <input type="checkbox"/> 3			

Mail documents to be recorded with required cover sheet information to:
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F0316-03.WPS

4/17/2002-UNBDLRI 00000038 10121683

3 FC1581

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PATENT/Docket No.: N 1571-1P US

ASSIGNMENT TO ASTRA PHARMA INC.

Title: Novel compounds with analgesic effect
Inventors: Benjamin Pelzman and Edward Roberts
PCT Appl. No: PCT/SE97/02051
Int'l Filing Date: 09 December 1997
Execution Date of Application:

As a below-named inventor, I hereby declare that:

My post office address is as stated below under my signature and I am named as inventor of the inventions or discoveries (herein INVENTIONS) as described in the patent application (herein APPLICATION) identified above. In view of valuable consideration, receipt thereof is hereby acknowledged, I do hereby assign and transfer unto ASTRA PHARMA INC., a corporation of Canada having a place of business at 1004 Middlegate Road, MISSISSAUGA, Ontario L4Y 1M4, Canada, its successors and assigns, my entire interest in and the full and exclusive right to the INVENTIONS, the APPLICATION and all related applications (including all divisions, reissues, continuations, and extensions thereof) and all counterparts in other countries, and any and all Letters Patent (and certificates of invention or similar certificates) (herein PATENTS) which may be granted based upon the INVENTIONS or the APPLICATION or related applications or counterparts in other countries; said transfer and assignment being applicable throughout the world. I hereby authorize and request officials of patent offices in any and all countries of the world to issue any and all of the PATENTS, when granted, to ASTRA PHARMA INC., its successors and assigns, as the assignee of my entire right, title, and interest in and to the same. I agree that I will communicate to ASTRA PHARMA INC., or its representatives, any facts known to me respecting the invention; testify in any legal proceedings; sign all lawful papers; execute all divisional, continuation, substitution, renewal, and reissue applications; execute all necessary assignment papers to cause any and all of the PATENTS to be issued to ASTRA PHARMA INC.; make all rightful oaths; and generally do everything possible to aid ASTRA PHARMA INC., its successors and assigns, to obtain and enforce proper protection for the INVENTION in any and all countries throughout the world.

FULL NAME OF FIRST INVENTOR: Benjamin Pelzman

Signature of Inventor: Benjamin Pelzman

Address: Döbelnsgatan 93, S-113 52 Stockholm, Sweden

Date: 17 December 1997

FULL NAME OF SECOND/JOINT INVENTOR: Edward Roberts

Signature of Inventor: Edward Roberts

Address: 2541 Chestnut Circle, St. Lazare de Vaudreuil, Québec, Canada J7T 2A1

Date: 23rd January 1998

OPR/ASSIGNMENTS

5/22/03 12:57 PAGE 2/3 RightFAX



MAY 22, 2003

FITCH, EVEN, TABIN & FLANNERY
MICHAEL A. SANZO
1901 K STREET, N.W.
SUITE 401L
WASHINGTON, D.C. 20006-1201

UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark Office
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RECORDATION DATE: 05/21/2003

REEL/FRAME: 013673/0318
NUMBER OF PAGES: 5

ERIEF: MERGER (SEE DOCUMENT FOR DETAILS).

ASSIGNOR:
ASTRA PHARMA INC.

DOC DATE: 12/22/1999

ASSIGNEE:
ASTRAZENECA CANADA INC.
1004 MIDDLEGATE ROAD
MISSISSAUGA, ONTARIO L4Y 1M4,
CANADA

SERIAL NUMBER: 10121603
PATENT NUMBER:

FILING DATE: 04/15/2002
ISSUE DATE:

PAULA MCCRAY, EXAMINER
ASSIGNMENT DIVISION
OFFICE OF PUBLIC RECORDS

OPR/ASSIGNMENTS 5/22/03 12:57 PAGE 3/3 RightFAX

05/21/2003 14:11 FAX 202 419 71

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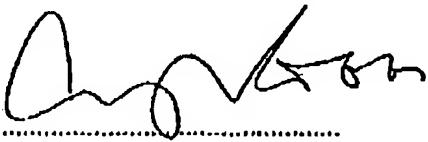
05/21/2003
700031157

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05/13/2003 (Rev. 6/4)		Patent and Trademark Office					
PATENTS ONLY							
<p>To the Honorable Commissioners of Patents and Trademarks: Please record the attached original documents or copy thereof.</p>							
<p>1. Name of conveying party(s): Astra Pharma Inc.</p> <p>Additional name(s) of conveying party(s) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		<p>2. Name and address of receiving party(s): Name: <u>AstraZeneca Canada Inc.</u> Internal Address: _____ _____ _____ Street Address: <u>1004 Middlegate Road</u> _____ City/State/ZIP: <u>Mississauga, Ontario L4Y 1M4</u> <u>CANADA</u> _____ Additional name(s) & address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>					
<p>3. Name of conveyance: <input type="checkbox"/> Assignment <input type="checkbox"/> Security Agreement <input type="checkbox"/> Change <u>10/121,683</u> Execution Date: <u>December 22, 1999</u> </p>		<p>4. Application number(s) or patent number(s): If this document is being filed together with a new application, the execution date of the application is: _____</p> <table border="0" style="width: 100%;"> <tr> <td style="width: 50%;">A. Patent Application No. (s)</td> <td style="width: 50%;">B. Patent No. (s)</td> </tr> <tr> <td>10/121,683</td> <td>_____</td> </tr> </table> <p>Additional numbers attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		A. Patent Application No. (s)	B. Patent No. (s)	10/121,683	_____
A. Patent Application No. (s)	B. Patent No. (s)						
10/121,683	_____						
<p>5. Name and address of party to whom correspondence concerning documents should be mailed: Name: <u>Michael A. Saxon</u> Internal Address: _____ _____ Street Address: <u>Finch, Even, Tabin & Flannery</u> <u>1801 K Street, N.W.</u> <u>Suite 401L</u> City/State/ZIP: <u>Washington, D.C. 20006-1201</u></p>		<p>6. Total number of applications and patents involved: <u>1</u></p> <p>7. Total Fee (37 C.F.R. § 3.7(f)) \$ <u>40.00</u></p> <p><input type="checkbox"/> Enclosed <input checked="" type="checkbox"/> Authorized to be charged to deposit account</p> <p>8. Deposit account number: <u>06-1135 Under Order No. 7567/73366</u></p> <p>(User's signature app'd to go if paying by deposit account)</p> <p>DO NOT TYPE THIS SPACE</p>					
<p>9. Statement and signature: To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document. Michael A. Saxon <u>Michael A. Saxon</u> <u>May 21, 2003</u> Name of Person Signing Signature Date</p> <p>Total number of pages (including cover sheet, attachments, and document): <u>5</u></p>							

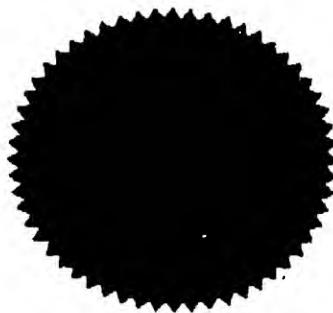
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I ANTHONY JANION GIBBS of Wilmslow, Cheshire, England, Notary Public duly authorised admitted and sworn and practising within the United Kingdom of Great Britain and Northern Ireland do hereby certify that the photostat matter hereto annexed is a true copy of a document the original of which was produced to me at Macclesfield, Cheshire, England, this 22nd day of June in the year two thousand.



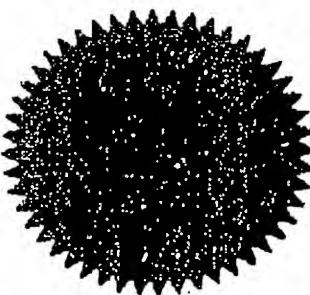
.....
Anthony Janion Gibbs
Notary Public



CANADA)
PROVINCE OF ONTARIO)
CITY OF TORONTO)
TO WIT:)

I, STEPHEN DOUGLAS BODLEY, a Notary Public in and for the Province of Ontario, by Royal Authority duly appointed, residing in the City of Toronto in the said Province DO HEREBY CERTIFY that the paper writing hereto annexed, the first page of which is stamped with an impression of my seal, is a true and correct photostatic copy of documents produced and shown to me out of custody of Blake, Cassels & Graydon LLP, Toronto, Ontario and purporting to be the original Certificate and Articles of Amendment of ASTRAZENECA CANADA INC. issued by the Ministry of Consumer and Commercial Relations and dated December 31, 1999, the said photostatic copy having been compared by me, page for page, with the said original documents, an act whereof being requested I have granted the same under my hand and notarial seal of office to serve and avail as occasion shall or may require.

DATED at Toronto this 13th day of March , 2000.


S. B. J.
A Notary Public in and for
the Province of Ontario

For Ministry Use Only
À l'usage exclusif du ministèreMinistry of
Consumer and
Commercial RelationsMinistère de
la Consommation
et des Relations
commerciales

CERTIFICATE

This is to certify that the
aforementioned status are effective on

DECEMBER 31 DECEMBRE, 1999

Ontario Corporation Number
Numéro de la société en Ontario

77196

Suz D. Lisi
Chairwoman / Directeur

Business Corporations Act / Loi sur les sociétés par actions

Form 3
Business
Amendments
ActOntario
Business
Corporations
ActARTICLES OF AMENDMENT
STATUTS DE MODIFICATION1. The name of the corporation is: Dénomination sociale de la société:

ASTRA-PHARMA INC.

2. The name of the corporation is changed to (if applicable): Nouvelle dénomination sociale de la société (s'il y a lieu):

ASTRAZENECA CANADA INC.

3. Date of incorporation/merger: Date de la constitution ou de la fusion:

1954 JUNE 28

(Year, Month, Day)
(année, mois, jour)4. The articles of the corporation are amended as follows: Les statuts de la société sont modifiés de la façon suivante:

To change the name of the Corporation to:

ASTRAZENECA CANADA INC.

DRAFTED
SAC (C.A.)
2/7/06

.8 173

2

5. The amendment has been duly authorized as required by Sections 168 & 170 (as applicable) of the Business Corporations Act.

La modification a été correctement autorisée conformément aux articles 168 et 170 (selon le cas) de la Loi sur les sociétés par actions.

6. The resolution authorizing the amendment was approved by the shareholders/directors (as applicable) of the corporation on _____.

Les actionnaires ou les administrateurs (selon le cas) de la société ont approuvé la résolution autorisant la modification le _____.

1999 DECEMBER 22

(Year, Month, Day)
(année, mois, jour)

Those articles are signed in duplicate.

Les présents statuts sont signés par le double exemplaire

ASTRA PHARMA, INC.

[Name of Corporation]
Dénomination sociale de la société(s)

卷之三

92.21500

(Signature)

President
(Description of Office)